Please Check One:
Regular Day Trip
Extended Day Trip
Overnight Trip

Dispatch Order	#:

## EAST STROUDSBURG AREA SCHOOL DISTRICT

## FIELD TRIP REQUEST FORM

The top section of this form is to be completed by the staff member seeking permission to make the trip. It should be submitted to

the building principal for approval at least thirty (30) days prior to the desired day trip da overnight trip. Buses and trips will be approved on a first-come, first-served basis. All field days should be scheduled between 8:30 A.M. and 1:45 P.M. Drivers will be assigned by the	i trips made during regular school
request enacifie drivers	•
SCHOOL North High School GROUP TSH REQU	TESTOR Michael Korb
SCHOOL Worth High School GROUP TS A REQU DESTINATION Nashville, Tennessee GRADE(S)/	LEVEL(S) 9-12
DIRECTIONS TO DESTINATION OBTAINED (Please check) YES D NO	4. 16
DATE June 18 - June 26 PLACE OF DEPARTURE (Be Specific) 5th	ourstring HS
NUMBER OF STUDENTS MAKING TRIP NUMBER OF SCHOOL BUS	_
BUS ARRIVAL TIME (For pre-departure preparation) 11:45 PM on Jun	<i></i>
BUS DEPARTURE TIME (After all pre-trip preparation is complete) 12:15-AM	
RETURN TIME (When bus(es) arrive back at school for other duties) 4:00 PM	June 26th at Strally
PURPOSE OF TRIP (Include relationship to present curriculum area being covered)	
participate in various National Competitive	events
* List must be submitted to the building principal at least to  * List must be submitted to the building principal at least to  PROJECTED COST OF TRIP:  # of Substitutes X # of Days	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$
SIGNATURE Staff Member Making Request	DATE 5/14/2012
SIGNATURE/APPROVAL Building Principal	_DATE
SIGNATURE/APPROVAL Director of Athletics and Activities*	DATE
* As is applicable BUS AVAILABILITY Transportation Office	_ DATE
SIGNATURE Asst. Supt./Curriculum & Instruction	_DATE
SIGNATURE Superintendent Shanuduu	DATE 5-16-12
9/02 White-Transportation Yellow- School Office Pink-School Nurse	e Gold-School Cafeteria